**RENTAL APPLICATION: TESLAFIT PRO SYSTEM**

To submit your application, please print this form, read it thoroughly,

 fill it out completely and email it to info@drpawluk.com. Questions? Call 1-866-455-7688.

SYSTEM INFORMATION:

|  |  |
| --- | --- |
| Item Description   | Total   |
| TeslaFit Pro System Includes TeslaFit Pro Desktop or Portable control unit, 12" Single Loop coil, 7" Double Loop coil, 7” paddle, 18”x 23” Mat w/ grey carrying tote and power cord.  | $1,500  45-days   |
| Security Deposit  Refundable upon return of system to office or applied to a device purchase. (See details below in waiver section)  | $2,000   |
| Shipping Fee - Standard Ground Shipping. Continental US only, NO rental to Hawaii or Alaska | $60.00  |
| Total   | $3,560.00   |

SHIPPING INFORMATION (No PO Box):

|  |  |
| --- | --- |
|  Name   |   |
|  Street Address   |   |
|  City   |   |
|  State, Zip code   |   |
|  Email Address   |   |
|  Phone Number   |   |

BILLING INFORMATION (If different):

|  |  |
| --- | --- |
|  Name   |   |
|  Street Address   |   |
|  City   |   |
|  State, Zip code   |   |
|  Email Address   |   |
|  Phone Number   |   |

METHOD OF PAYMENT:

[ ]  Visa [ ]  MasterCard [ ]  Discover [ ]  American Express

Credit Card Number Expiration Date

Name on Card CVV Code

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**RENTAL TERMS AND CONDITIONS**

**Rental agreement is for 45-days.**Your rental period begins the date of delivery and ends 45-days after delivery. The rental fee and security deposit must be prepaid. Renter is responsible for return shipping charges if applicable.

**Before rental completion date, renter must contact Health Energy Partners to obtain a return merchandise authorization number (RMA#) and instructions for return of the TeslaFit Pro rental.** **If Health Energy Partners is notified of the return on or before the rental end date, renter is granted 7-days after the rental end date to return the system to HEALTH ENERGY PARTNERS, LLC*.* User responsible for return shipping costs**. ***Return Delivery address: Health Energy Partners, 1001 Cromwell Bridge Rd., Ste.212, Towson, MD 21286.***

**USER AGREES:**

1. To insure, protect and be responsible for the safe keeping of the TeslaFit Pro.
2. To return the TeslaFit Pro in good physical and working condition or pay the balance due for the device within 7 days after the termination of this Agreement.
3. That the TeslaFit Pro at all times remains the property of Health Energy Partners, LLC, and the User has no title or property interest in the TeslaFit Pro.
4. To pay all costs of collection if equipment is not returned to Health Energy Partners within 7-days after the termination date of this Agreement.
5. To having converted 45-day rental to a theft if the User fails to return the equipment or pay for it within 7-days after the termination of this Agreement.
6. The failure to return the TeslaFit Pro Equipment at the end of 7-days will be treated as if User was an Independent Agent of Health Energy Partners, LLC and consequently, an IRS Form 1099- Misc.
	1. will be issued for the standard weekly/monthly rental fee(s) due and payable for each subsequent week/month; until the equipment is returned to Health Energy Partners.
7. To pay all freight and related insurance costs associated with the return shipment of specified TeslaFit Pro equipment to Health Energy Partners, LLC.
8. Sales tax is applicable if the shipping address of the unit is in California or Maryland. ***Sales tax will be added to the total amount due if a unit is purchased at the end of the 45-day rental period****.*

**If renter does not return the TeslaFit Pro System at the end of the contract period, Health Energy Partners, LLC will issue an IRS Form 1099-Misc each month indefinitely until the TeslaFit Pro is returned. If renter wishes to purchase the TeslaFit Pro System at the end of the 45-day rental period, the entire $3,500 will be applied towards the purchase of chosen TeslaFit system and optional applicators or any PEMF device purchase of $5,000 or more and the user will owe the remaining balance, immediately payable to Health Energy Partners (**[**www.drpawluk.com**](http://www.drpawluk.com)**).**

**Waiver of Liability:**TeslaFit Pro products are not intended to be used to diagnose, treat, cure or prevent any disease. TeslaFit Pro products are not intended to replace conventional medical treatments, but are to be used as a supportive and complementary application. TeslaFit Pro products have not been approved by the FDA. Please contact your doctor first when you have an existing health problem. The undersigned releases Dr Pawluk, Health Energy Partner[s, www.drpawluk.com an](http://www.drpawluk.com/)d any independent consultants from any claims, demands or legal actions and legal costs from any personal injury or death deemed as a result of a TeslaFit Pro product.

Renter’s Name (Please print)

Renter’s Signature Date